



6 December 2022

Medical Board of Australia Secretariat
Australian Health Practitioner Regulation Agency
GPO Box 9958
Melbourne VIC 3001

Via email: medboardconsultation@ahpra.gov.au

Dear MBA Secretariat,

RE: Public consultation – Regulation of medical practitioners who provide cosmetic medical and surgical procedures

The Royal Australian College of General Practitioners (RACGP) thanks the Medical Board of Australia for the opportunity to comment on the regulation of medical practitioners who provide cosmetic medical and surgical procedures.

The RACGP made a previous [submission](#) to the independent review of the regulation of medical practitioners who perform cosmetic surgery in April 2022. We are pleased to note some amendments have been made that align with recommendations in that submission. We would like to reiterate that the *draft Guidelines for registered medical practitioners who perform cosmetic medical and surgical procedures* (the draft guidelines) could be further improved if:

- the guidance is supported by monitoring requirements (as detailed in section 1 and 4 [page 2-3] of our [previous submission](#))
- there is public education for patients around what qualifications and titles mean, in addition to the draft Patient and Consumer Health and Safety Impact Statement
- services are delineated according to the complexity of the procedures
- general practitioners (GPs) have access to reputable independent consumer resources to support patients who seek advice or referral to cosmetic procedures. This could include prompted discussion points for the patient to consider such as questions to ask a provider before considering a procedure, advice to have a cooling off period before committing to surgery, benefits versus costs of obtaining a second opinion and other relevant points to assist consumers in making an informed and well thought out decision
- it was a requirement that the evidence on the risks and benefits of cosmetic procedures was clearly stated to consumers to avoid misleading therapeutic claims.

In addition to reiterating some of the recommendations made in our previous submission, we offer the following comments for consideration.

- As the draft guidelines do not apply to reconstructive plastic surgery, it is important there is clarity between what constitutes cosmetic and what constitutes reconstructive plastic surgery. The RACGP recommends clarifying the definitions. Examples of reconstructive plastic surgery, such as treatment of disfiguring scars, can be provided to assist.
- Section 2.1 of the draft guidelines outlines that *All patients seeking cosmetic surgery must have a referral, preferably from their usual general practitioner or if that is not possible, from another general practitioner.* The GP role in referring patients who seek cosmetic surgery needs to be clearly articulated.



The purpose of referral from a GP is to provide important medical information to the referred clinician such as patient history, existing comorbidities, and medications. An appointment with the GP also provides an important opportunity to counsel patients (particularly those under the age of 18) and to assess the patient for underlying psychological conditions, such as body dysmorphic disorder (BDD), which may make them an unsuitable candidate for the procedure. A referral from a GP is therefore not an endorsement of the procedure or the clinician. It is the responsibility of the referred clinician to advise if the procedure is appropriate.

- The assessment of patient suitability in section 2.3 (major cosmetic medical and surgical procedures) and 2.2 (minor (non-surgical) cosmetic medical procedures) should be amended to: "an independent medical practitioner, such as a GP (not the medical practitioner who will perform the procedure) must assess the patient for underlying psychological conditions such as body dysmorphic disorder (BDD). If any conditions are identified an appropriate referral must be made to their usual GP." This requirement should apply to patients over 18 years of age to avoid a conflict of interest.
- We recommend that medical practitioners should ask whether a patient has been rejected for cosmetic surgery in the last 12 months to prevent doctor shopping.
- The *draft Registration standard – endorsement of registration for cosmetic surgery for registered medical practitioners*, outlines that there will be data collection requirements for endorsed medical practitioners. The purpose of this data collection, the format (eg de-identified patient information) and frequency is currently unclear. It is also unclear if data collection is to be used for monitoring purposes. The RACGP recommends further information is provided in this standard to ensure transparency in this process.

Thank you again for the opportunity to comment. If you have any questions, please contact [REDACTED]

Yours sincerely

Dr Nicole Higgins
President